முதல்வா் அலுவலகம், நெசவுத் தொழில் நுட்பப் பயிலகம், சென்னை கூடும்

முன்னிலை திரு. இரா. இராஜமாணிக்கம், எம். முதல்வர் (பொ.)

<u>செயல்முறை ஆணை எண் : 244/ அ3/2015 நூள் 13.02.2015</u>

பொருள்:

நெசவுத் தொழில் நுட்பப் பயிலகம், சென்னை – மாணவாகளின் குறைகளை கேட்டு நிவர்த்தி செய்தல் – தொடர்பாக

இப்பயிலகத்தில் பயிலும், மாணவ / மாணவியாகளுக்கு ஏதேனும் குறை இருப்பின் அதைப்பற்றி விசாரித்து, உரிய தீா்வினை வழங்கிட கீழ்க் கண்ட பணியாளா்களைக் கொண்ட குழு அமைக்கப்படுகின்றது. இக்குழு மாணவாகளுக்கு ஏற்படும் குறைகள் (Grievance) பற்றி விசாரித்து உடனடி தீர்வு வழங்கிட ஆணையிடப்படுகிறது.

வ.எண்.	் பெயர்	பதவி
1	குழுத் தலைவா் திரு. இரா.இராஜமாணிக்கம்	முதல்வர் (பொ)
2	முனைவர் து.பா.செ.அமராவதி	விரிவுரையாளர் பூலி
3	திரு ஏ.ஆர்.சரவணன்	விரிவுரையாளர் (மு.நி)
4	திரு. எம்.வி.சக்கரவர்த்தி	கண்காணிப்பாளா் ,

முதல்வர் (பொ)

நகல்: 1. முதல்வர் மேஜை

2. முதலாமாண்டு, இரண்டாமாண்டு மற்றும் மூனீறாமாண்டு வகுப்பில் வாசிக்க

3. அறிவிப்பு பலகை, 4. அ1 (ம) அ3 இருப்பு கோப்பு

circular



### UNITED INDIA INSURANCE COMPANY LIMITED

### RECEIPT

Issuing Office code/Address:	010909 / BO TIRUVANMIYUŔ PLOT NO. 112, 2ND FLOOR, THIRUVALLUVAR	Receipt Number:	10101090918107940998
	SALAI,THIRUVANMIYUR, CHENNAI600041	Collection Date :	11/09/2018

Received with thanks from THE PRINCIPAL (INCHARGE) (Customer ID: 23053555992, Customer GST/UIN No: Not Available) a sum of Rs. 4165.00( Four thousand one hundred sixty-five rupees only) as per detail given hereunder:

	1		7	5	
SL No	Policy Number	Policy Type	Endt/Ren/Clm/Decln No	Particulars	Total Amount
1	0109094218P107645078	GroupPersonalAccident	0	Final Premium	3,529.00
2	0109094218P107645078	GroupPersonalAccident	0	CGST	318.00
3	0109094218P107645078	GroupPersonalAccident	0	SGST	318.00

Total (Rounded Off): 4,165.00

> Stamp Duty: Bank Charges: 0.00

> > **AUTHORISED SIGNATORY**

**Total Amount:** 4,165.00

CD De	etails			
SL No	CD Account Number	CD Account Holder ID	CD Account Holder Name	Tagged Amount
1	C100029703	AGD0128884	PALANIVEL M	4,165.00

Particulars:

GSTIN (UIIC): 33AAACU5552C1ZQ

for UNITED INDIA INSURANCE COMPANY LIMITED

ashier Initial

1. Receipt valid subject to realisation of cheque

2. Please quote policy no., collection no., and date in all correspondences.



### UNITED INDIA INSURANCE COMPANY LIMITED

PLOT NO. 112, 2ND FLOOR, THIRUVALLUVAR SALAI, THIRUVANMIYUR, CHENNAI

CHENNAI - 600041 TAMIL NADU

PH: (44) 24419485 FAX: EMAIL:

3ludon 15 GROUP PERSONAL ACCIDENT POLICY

POLICY NO.:0109094218P107645078

PERIOD OF INSURANCE From 10:00 Hrs of 06/09/2018 To Midnight of 05/09/2019

Insured

### M/s THE PRINCIPAL (INCHARGE)

TEXTILE INSTITUTE OF TECHNOLOGY, TARAMANI, CHENNAI.

600113 CHENNAI TAMIL NADU

Agent Name

: PALANIVEL M

Agent Code

: AGD0128884

Mobile/Landline Number/Email : 9962888195

mpvel1@gmail.com



LET US JOIN THE FIGHT AGAINST CORRUPTION.
PLEASE TAKE THE PLEDGE AT https://pledge.cvc.nic.ii

For any Information, Service Requests, Claim intimation and Grievances please write to 010909@uiic.co.in

REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014 Website: http://www.uiic.co.in

Printed By: PRI44308 @ 11/09/2018 4:04:49 PM





## GROUP PERSONAL ACCIDENT POLICY

SCHEDULE

A28P107645078		Period of Insurance:	pasiness/ occupation	Business/Occupation	161.10).	Tel (0):	TAGILIE OF CASCOLLELYID	Name of Cuctome-/I	Policy No.: 01090
Prev.Pol.No.:   CHARGE  / 23053555992  Tel.(R):    Email:  9/2018   To MIDNIGHT of	20.0010013	From 10:00 Hours			Fax:			2	94218P107645078
	05/09/2018 TO MIDNIGHT of 05/09/2019	06/00/2019	Email:	liei.(n).	Tol (0).	1	CHARGE) /	F. C. C. 190.	Prev Pol No :

Premium: Three thousand five hundred twenty-nine rupees only

UIIC 010909 : 100%

INSURED DETAILS:
As Per Annexure Attached.

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"AS GC CORE IS NOT ALLOWING TO UNDERWRITE WITH LESS THAN 100 NOS IN STUDENT SAFETY POLICY, WE HAVE ISSUED THIS POLICY WITH SAME TEAMS & CONDITIONS, CLAUSES APPLICABLE TO STUDENT SAFETY POLICY UNDER PA POLICY"

OT IT IT	Direct Business :
AGD0128884	Agency/Broker Code : Dev. Officer Code :
11/09/2018	Receipt Date:
10101090918107940998	Receipt Number :
₹4,165.00	Pocar.
5.00	Total .
-	Stamp Duty:
318 00	5651(9%):
₹ 318.00	CG21(9%):
₹ 3,529.00	Net Premium:

Office GST No.: Invoice No. & Date:			e Charges-NIL	Allount Subject to Reverse Charges-NIL
9971	4218I107645078 & 11/09/2018	Invoice No. & Date:	1,66	
	ATTOCCOOLING A		9971	SAC Code:
	OZ LOCABALIONANEE	Office GST No.:		CUSCOMER GST/UIN No.:

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹1 lakh or a claim for refund of premium exceeding ₹1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

Date of Proposal and Declar WITNESS WHEREOF, the un day of September 2018



GONSOLIDATED POLICY STAMP DUTY PAID. BY DUR CHENNAI REGIDERAL STRICE VIDE G.O. B.O. (RL) NO. 481 DK. 23.8.2017 hand at BO TIRUVANMIYUR on this 11 th

http://gccore.uiic.in/Configurator/Underwritting/Masters/reports/frmPolicySchedule.as... 11/09/2018

Authorized Signatory.
Underwritten By - PRI44308 ( BO UW CUM CASHIER )

United India Insurance Co. Ltd.
Regional Office, No. 134, Greams Road, Chennel-6.
For MOTOR - @ Motor OD Hub
Ph. No. 2829 1203, 2829 1204
Email: chennairoodhub@uiic.co.in If any Claim Occurred, Please report to For OTHERS - @ Non Motor Hub Ph. No. 2829 1534, 2829 1535 Email : nmrochn@uiic.co.in

Name of Insured   Occupation   Age   Date   Category   EXTILE INSTITUTE   CATEGORY   C	STORY LINE	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	00	7	6	S	4	w	2	1	iployee Id
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Name		Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Student	Occupation
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# POLICY NO.: 0109094218P107645078

## GROUP PERSONAL ACCIDENT POLICY

WHEREAS the Insured named in the Schedule herein (herein after called the insured) has made/had made and/ or caused to be made to the United India Insurance Co. Ltd., (herein after called the Company) proposals and/or declaration dated as staged in Schedule hereto which together with any statements and warrantees contained therein shall be the basis of this contract and is Jare deemed to be incorporated therein for the insurance hereinafter set forth in respect of persons detailed in the Schedule of insured persons (herein after called the "Insured Persons").

NOW THIS POLICY WITNESSETH that subject to and in consideration of the payment made to the Company, the premium for the period stated in the schedule or for any further period for which the Company, may accept payment and subject to the cerms, prospons, exclusions, definitions and conditions contained herein or endorsed or otherwise expressed herein the company shall pay the insured to the extent and in the manner hereinafter provided that if any of the insured persons shall :

Sustain any bodily injury resulting solely and directly from accident caused by external violent and visible means, then the company shall pay to the insured or his legal personal representative(s) as the case may be the sum or sums hereinafter set forth in respect of any of the insured persons specified in the schedule:

If such in Jury shall within twelve calendar month of its occurrence be the sole and direct cause to the death of the insured persons the Capital Sum insured stated in the Schedule hereto applicable to such insured person.

If such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of :

 Use of two hands or two feet, or of one hand and one foot or of such loss of sight of one eye and such loss of
use of one hand or one foot, the capital sum insured stated in the Schedule hereto. . Sight of both eyes, or the actual loss by physical separation of two entire hands or two entire feet, or one-entire hand and one entire loot or of such loss of sight of one-eye and such loss of one-entire hand or loss of one entire hand or loss of one entire loot, the capital sum insured stated in the Schedule hereto applicable to such insured person.

If such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of :

The sight of one eye or of the actual loss by physical separation of one entire hand or one entire foot, fifty
percent (50%) of the capital sum insured stated in the Schedule hereto applicable to such insured person.

Total and rescoverable loss of use of a hand or a foot without physical separation, fifty percent (50%) of the capital sum insured stated in the Schedule hereto applicable to such insured person.

Note : For the purpose of clause (b) and (c) above, physical separation of a hand or feet means separation of hands at or above the surest and or of the foot at or above the ankle. If such nijury shall as a direct consequence thereof immediately permanently totally and absolutely, disable the insured person from engaging in any employment or occupation of any description whatsoever, then a lump sum engal to hundred percent (100%) of the Capital Sun insured stated in the schedule hereto applicable to such

If such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the total and/or partial irrecoverable loss of use or the actual loss by physical separation of the following then the percentage of the Capital Sum insured applicable to such insured person in the manner indicated below:

<			×			ix a.	^		viii a.	c.	-	vii a.		Vi a	v	iv L	III 0	= -	d	0	b.	i a.				SI No.
a Loss of metacarpals - first or second (additional)	c. Loss of little finger - 1 phalanx	b. Loss of little finger - 2 phalanges	a. Loss of little finger - 3 phalanges	Loss of ring finger - 1 phalanx	Loss of ring finger - 2 phalanges		Loss of middle finger - 1 phalanx				Loss of index finger -two phalanges		Loss of thumb -one phalanx	a. Loss of thumb -both phalanges	Loss of 4 fingers	Loss of 4 fingers and thumb of offer fidito	Loss of hearing -one ear	Loss of hearing -both ears	d. Other than greet, of more tildli one too loss seen	c. Greet -one phalanx	Greet -both phalanges	Loss of toes -all				Item
	3	2	ω	4	2	4	5	2	4	6	4	8	10	10	25	35	40	15	50	1	2	5	20	Insured	Sum	Capital

_	XII.	any other permanent partial disablement	% as
-			assessed
-			by the
			Doctor

9 If such niury shall be the sole and direct cause of temporary rotal disablement, then so long as the insured person shall be totally disabled from engaging in any employment or occupation of any description whatsoever a sum at not exceeding fes. 2000; between the cause of one percent (1%) of the capital sum insured stated in the schedule hereto per week, but in any case not exceeding fes. 2000; per week or 25% of the monthly salery whichever is lowest in all under all PA policies covering such insured person.

Provided that the compensation payable ruleder the foregoing sub-clauses (f) shall not be payable for more than 100 weeks in respect of any one injury calculated from the date of commencement of the disablement and in no case shall exceed the Capital sum insured applicable to such insured person.

9) In the event of Death of the insured person due to accident as defined in the policy outside her/his residence the company shall emburse expenses in addition to the amount payable under sub clause(a) to (f) expenses incurred for transportation of insured 'persons dead body to the place of residence subject to a maximum of 2% of capital sum insured or Rs.2,500/- which ever is less.

### EXCEPTION

### PROVIDED ALWAYS THAT The company shall not be liat

liable under this policy for:

- Compensation under more than one of the foregoing sub-clauses in respect of the same period of disablement.
- Any other payment to the same person after a claim under one of the sub-clauses (a), (b), (c) or (d) has been admitted and become payable.
- Any payment in case of more than one claim in respect of such insured person under this Policy during any one period of insurance by which the maximum liability of the company in that period would exceed the sum payable under sub-clause (a) of the Policy to such insured person.
- Payment of weekly compensation until the total amount shall have been ascertained and agreed
- Payment of compensation in expect of death, injury or disablement of insured passes of histo-intentional self-injury, suicide or attempted suicide (b) whiste the state under the inhibition or of the state of the s

Standard type of aircraft means any aircraft duly licensed to carry passenges; (for hire or otherwise) by appropriate authority irrespective of whether such an aircraft is privately owned or chartered or operated by a regular airline or whether such an aircraft has a single engine or multiengine.

- Payment of compensation in respect of Death, Injury or disablement of the insured person due to ansiting out of or directly or indirectly connected with or traceable to war invasion, act of foreign enemy, Hostilities (whether war be declared or not) Cull War, Reabellion, Revolution, Insurrection, Humby, Milatry or usurped Power, Setzure, Capture Arrests, Restraints and Detainment of all Kings, Princes and people of whatever nation, condition or quality so ever.
- ment of compensation in respect of Death of, or bodily injury or any disease or illness of the insured persons
- directly or indirectly caused by or contributed to by or axising from ionising radiation or contamination by radio activity from any nuclear field or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exception combustion shall include any self sustaining process of nuclear fission.
- directly or indirectly caused by or contributed to by or arising from nuclear weapon/ materials.

Provided also that the due observance and fulfillment of the terms and conditions of this Policy (which conditions and all endorsements hereon are to be reads part of this policy) shalls so far as they relate to anything to be done or not to be done by the insured be a condition precedent to any liability of the company under this Policy.

Pregnancy Exclusion Clause: The Insurance under this Policy shall not extend to cover death disablement resulting directly or indirectly caused, contributed to or aggravated or prolonged by childbirth or pregnancy or in consequence thereor.

### CONDITION

Upon the happening of any event, which may give rise to claim under this Policy, written notice with full particulars must be given to the company immediately. In case of death, written notice also of the death must, unless reasonable cause

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is shown, be so given before interriment, cremation and in any case, within one calendar month after the death, and in the event-of loss of sight or amputation of limbs, written notice thereof must also be given within one calendar month after such loss of a sight or amputation.

after such loss of a sight or amputation, and the such loss of a sight or amputation and the company shall be furnished of all matter upon which a claim is based. Any medical or other satisfactory Proof to the Company shall be furnished of all matter upon which a claim is based. Any medical or other agent of the Company shall be allowed to examine the Persons insured on the occasion of any alleged injury or agent to the company and in the event of disablement when and so often as the company and in the event of the foody of the insured persons, such evidence as the company may from death to make a post-morten examination report in necessary be furnished within the space time to time require shall be furnished and a post-morten examination report in necessary be furnished within the space time to time require shall be furnished and a post-morten examination report in necessary be furnished within the space of loss of sight of the insured person(s) of fourteen days after demand in writing and in the event of a claim in respect of loss of sight of the insured person(s) of fourteen days after demand in writing and in the event of a claim in respect of loss of sight of the insured person(s) of lowersen days after demand in writing and in the event of a claim in respect of loss of sight of the insured persons and the company may reasonably deem desirable.

No sum payable under this policy shall carry interest.

- The Company shall not be liable to make any payment under this policy in respect of any claim if such claim be in any manner fraudulent or supported by any fraudulent statement or device, whether by the insured or by any person on behalf of the insured persons.
- The Insured shall give immediate notice to the Company on any change of the insured persons, business occupation.
- 6) The insured shall on tendering any premium for the renewal of this policy give notice in writing to the Company of any disease physical defect or infirmity with which any of the insured person(s) have become affected since the Payment of the last preceding premium.
- This policy may be renewed by mutual consent every year and in such event, the renewal premium shall be paid to the Company on or before the date of expiry of the policy or of the subsequent renewal thereof. The Company shall not, however be bound to give notice that such Renewal Premium is due.
- The Company may at any time cancel the Policy on grounds of misrepresentation, fraud, non-visclosure of material fact in enon-cooperation by the insured by sending lifteen days notice in writing by Registered A/D to the insured at his last on some address in which case the Company shall return to the insured a proportion of the last premum corresponding to known address in which case the Company shall esture to the sixued a proportion of the last premum corresponding to the unexpired period of insurance if no claim has been paid under the policy. The insured may at any time cancel this policy and in such event the Company shall allow refund of premium at Company's short period rakes provided no claim policy and in such event the Company shall allow refund of premium at Company's short period rakes provided no claim has occurred upto the date of cancellation.
- If any dispute or difference shall arise as to the quantum to be paid under this policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the desion of a sale arbitrator to be appointed or within 30 days party invoking or writting by the parties to or if they cannot agree upon a single arbitrator within 30 days party invoking arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the disputs difference and the arbitrators are appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.
- It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this policy.

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that the award by such arbitrator/arbitrators of the amount of the loss or damage shall be first obtained.

The insured shall throughout the period of insurance keep and maintain a proper record of register containing the dames of all the insured persons and other relevant details as are normally kept in any institution/ cranisation. The insured shall detail to company any additions in the number of insured persons as and when analying during theseroid of the insured persons to sure of the company any the additional premium as agreed. Unless otherwise expressly declared and asked to be covered without the property of the property of the covered by the company all the insured persons covered within under this policy are free from any dashinty /defect which hall be the subject matter of leability under the policy.

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### DEFINITIONS:

### ACCIDENT

Accident - An accident is a sudden, unforeseen and involuntary event caused by external and visible and violent means to "Acute condition" - Acute condition is a disease, illiness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/illness/injury which leads to full

recovery.

"Chronic condition" - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:

"Characteristics"

it needs ongoing or long-term monitoring through consultations, examinations, check-ups and/or tests -

- it needs ongoing or long-term control or relief of symptoms
- it requires your rehabilitation or for you to be specially trained to cope with it
- iv. it continues indefinitely
- it comes back or is likely to come back.

- CONSERVIAL ANOMALY
  Congential foronsy refers to a condition(s) which is present since birth, and which is abnormal with reference to form, structure or position.

  Internal Congenital Anomaly
  Which is not in the visible and accessible parts of the body.

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External Congenital Anomaly
Which is in the visible and accessible parts of the body.

CONTRIBUTION

CONDITION PRECEDENT
Condition Precedent shall mean a policy term or condition upon which the Insurer's liability under the policy is conditional

trobution is essentially the right of an insurer to call upon other insurers liable to the same insured to share the cost of indemnity claim on a rateable proportion.

### Day Care centre mea

y. Care centre means any institution established for day care treatment of iliness and/or injuries or a medical set-up thin a hospital and which has been registered with the local authorities, wherever applicable, and is under the pervision of a registered and qualified medical practitioner AID must comply with all minimum criteria as under: the stagulated nucleif as employment.
Has qualified Medical Practitioner(s) in charge. Has qualified Medical Practitioner(s) in charge thas a fully equipped operation theatre of its own where surgical procedures are carried out.
Has a fully equipped operation theatre of its own where surgical procedures are carried out.
Haintains daily records of patients and will make these accessible to the Insurance Company's authorized personnel.

DAY CARE TREATHENT: Day Care treatment means the medical treatment and/or surgical procedure which is -(i). Undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hrs because of technological and (ii) which would have otherwise required a hospitalisation of more than 24 hours. Treatment normally taken on an out-patient basis is not included in the scope of this definition.

DEDUCTIBLE
Deductible is a cost sharing requirement under a Personal Accident Insurance Policy that provides that the Insurer will not be lable for a specified rupee amount in case of Indemnity policies and for a specified number of days/hours in case of hospital cash policies which will apply before any benefits are payable by the insurer. A deductible does not reduce the sum insured.

### HOSPITAL/NURSING HOME

A Hospital means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a Hospital with the local authorities under the Clinical establishments (Registration and Regulation) Act, 2010 or under the enactments specified under the Schedule of Section 56(1) of the said Act OR complies with all minimum criteria as under

Has qualified nursing staff under its employment round the clock.
 Has at least 10 in-patient beds in towns having a population of less than 10 lacs and at least 15 in-patient beds in all other actions.
 Other allowers.
 Other allowers.
 Other allowers.
 In a sulfield medical practitioner(s) in charge round the clock;
 Has a sulfield medical practitioner(s) in charge round the clock;
 Has a sulfield medical practitioner in the properties of the clock;
 Has a sulfield medical practitioner of the clock;
 Has a sulfield medical practitioner of the control of patients and makes these accessible to the insurance company's authorized personnel.
 Has a sulfield must be controlled an establishment which is a place of rest, a place for the aged, a place for drug-addicts or place for alcoholics, a hotel or a similar place.

### Means admission in a

Means admission in a Hospital/Nursing Home for a minimum period of 24 In-patient care consecutive hours except for specified procedures/treatments, where such admission could be for a period of less than 24 consecutive hours.

### 10

Injury means accidental physical bodily harm excluding liness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.

### 11

IN-PATIENT CARE
In-patient care means treatment for covered event. which the insured person has to stay in a hospital for more than 24 hours for a

### 12

INTENSIVE CARE UNIT

INTENSIVE CARE UNIT
The term 'Intensive Care' unit means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated Medical Practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.

### 13 MEDICAL ADVISE Medical Advise - Any consultation

advice from a Medical Practitioner including the issue of a any prescription or repeat

### MEDICAL EXPENSES

Medical expenses - Medical Expenses means those expenses that an Insured person has necessarily and actually incurred for medical treatment on account of illness or Accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitals or

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### Medically Necessary treat

is defined as any treatment, texts, medication, or stay in hospital or part of a stay in

Inducially Medessary treatment is dufined an application of the medical medical medical medical management of the induced or the medical management of the induced or the medical management of the induced or the medical management of the induced or medical care in some medical medical care in some medical medical care in some medical medical medical medical practice or by the recomments in Induced professional familiar medical medical practice or by the recomments in Induced professional management of the medical dical care in scope, duration

# A Medical Practitioner is a po A Medical Practitioner is a person who holds a valid registration from the Medical Council of any State of India or Medical Council of India or Council for India or Medical Council of India or Council for India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of licence.

The term Medical Practitioner would include Physician, Specialist and Surgeon. (The Register the insured or close family members such as parents, in-laws, spouse and children). red Practitioner should not be

### NOTIFICATION OF CLAIM Notification of claim is the pro-

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process of notifying a claim to the r to which it should be notified. well as the

### 18

ROOM RENT
ROOM rent shall mean the amount charged by a hospital for the Occupancy include associated medical expenses. day (24

Subrogation shall mean the right of the insurer to assume the under the policy that may be recovered from any other source.

### 19

20 SURGERY OR SURGICAL PROCEDURE
Surgery or Surgical Procedure means manual and/or operative procedure(s) required for treatment of an illness or injury, correction of deformates and defects, diagnosis and cure of diseases, relief of suffering or prolongation of life, performed in a hospital or day care centre by a Medical Practitioner.

## losure to Information Norm

The policy shall be void and all premium paid hereon description, or non-disclosure of any material fact.